

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

We Vote - Nosotros Votamos - PPAMM Committee

ADDRESS (number and street)

555 Capitol Mall, Suite 1425

☐ Check if different than previously reported. (ACC)

Sacramento

CA

95814

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00527226

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☒ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Rayroz Dodson-Crawford

Signature of Treasurer

Rayroz Dodson-Crawford

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

We Vote - Nosotros Votamos - PPAMM Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
01 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y  
09 / 30 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2012</span>		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	0.00	
(c) Total Receipts (from Line 19) .....	44725.00	44725.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	44725.00	44725.00
7. Total Disbursements (from Line 31) .....	2629.04	2629.04
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	42095.96	42095.96
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	8458.24	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

We Vote - Nosotros Votamos - PPAMM Committee

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	2

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	41070.00	41070.00
(ii) Unitemized .....	2320.00	2320.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	43390.00	43390.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	50.00	50.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	43440.00	43440.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1285.00	1285.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	44725.00	44725.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	44725.00	44725.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	2629.04	2629.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2629.04	2629.04
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2629.04	2629.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2629.04	2629.04

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	43440.00	43440.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	43440.00	43440.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	2629.04	2629.04
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	2629.04	2629.04

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 17  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**We Vote - Nosotros Votamos - PPAMM Committee**

Full Name (Last, First, Middle Initial)

**A. Lysbeth Warren Anderson**

Mailing Address P.O. Box 1797

City State Zip Code  
 Los Altos CA 94023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 / 20 / 2012

**Transaction ID : INCA10**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Allan Brown**

Mailing Address 157 Goya Road

City State Zip Code  
 Portola Valley CA 94028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 / 10 / 2012

**Transaction ID : INCA11**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Elizabeth Davila**

Mailing Address 897 Norfolk Pine Avenue

City State Zip Code  
 Sunnyvale CA 94087

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 / 10 / 2012

**Transaction ID : INCA5**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**We Vote - Nosotros Votamos - PPAMM Committee**

Full Name (Last, First, Middle Initial)

**A. Judith Estrin**

Mailing Address 405 El Camino Real, #152

City State Zip Code  
Menlo Park CA 94025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JLabs

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2012

**Transaction ID : INCA32**

Amount of Each Receipt this Period

12000.00

Full Name (Last, First, Middle Initial)

**B. Karen F. Grove**

Mailing Address 3826 Alameda De Las Pulgas

City State Zip Code  
Menlo Park CA 94025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Volunteer / Advocate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 26 / 2012

**Transaction ID : INCA33**

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

**C. Judith O'Brien**

Mailing Address 1655 Bay Laurel Drive

City State Zip Code  
Menlo Park CA 94025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Incubic

Occupation

Venture Capitalist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : INCA1**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

23000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

We Vote - Nosotros Votamos - PPAMM Committee

Full Name (Last, First, Middle Initial)

**A. Planned Parenthood Advocates Mar Monte**

Mailing Address 1691 The Alameda

City State Zip Code  
San Jose CA 95126

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10605.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 30 2012

Transaction ID : INCA36

Amount of Each Receipt this Period

9320.00

Full Name (Last, First, Middle Initial)

**B. Rebecca Barfknecht**

Mailing Address 503 Oak Grove Avenue

City State Zip Code  
Menlo Park CA 94025

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 30 2012

Transaction ID : IDTA11

Amount of Each Receipt this Period

300.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Rebecca Barfknecht**

Mailing Address 503 Oak Grove Avenue

City State Zip Code  
Menlo Park CA 94025

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 30 2012

Transaction ID : IDTA12

Amount of Each Receipt this Period

100.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

9320.00



: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : INCA36

Intermediary for the below contributions

Form/Schedule:  
Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

We Vote - Nosotros Votamos - PPAMM Committee

Full Name (Last, First, Middle Initial)

**A. Elaine Cummings**

Mailing Address 1360 Garden Lane

City State Zip Code  
 Menlo Park CA 94025

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Self-Employed

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 09 30 2012

Transaction ID : IDTA43

Amount of Each Receipt this Period

20.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Elaine Cummings**

Mailing Address 1360 Garden Lane

City State Zip Code  
 Menlo Park CA 94025

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Self-Employed

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 09 30 2012

Transaction ID : IDTA42

Amount of Each Receipt this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Karen F. Grove**

Mailing Address 3826 Alameda De Las Pulgas

City State Zip Code  
 Menlo Park CA 94025

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

None

Volunteer / Advocate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 09 30 2012

Transaction ID : IDTA10

Amount of Each Receipt this Period

500.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

We Vote - Nosotros Votamos - PPAMM Committee

Full Name (Last, First, Middle Initial)

A. Khristina Horn

Mailing Address 320 West Cliff Drive

City State Zip Code  
 Santa Cruz CA 95060

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Private Investigator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 30 2012

Transaction ID : IDTA32

Amount of Each Receipt this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Jill Parker

Mailing Address 15 Riordan Place

City State Zip Code  
 Menlo Park CA 94025

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Community Volunteer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 30 2012

Transaction ID : IDTA52

Amount of Each Receipt this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Amy Joyce Rao

Mailing Address 6700 Koll Center Parkway, Suite 14

City State Zip Code  
 Pleasanton CA 94566

FEC ID number of contributing federal political committee.

C

Name of Employer

Integrated Archive Systems

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 30 2012

Transaction ID : IDTA6

Amount of Each Receipt this Period

1500.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 17

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**We Vote - Nosotros Votamos - PPAMM Committee**

Full Name (Last, First, Middle Initial)

**A. Lisa Serwin**

Mailing Address 85 Reservoir Road

City State Zip Code  
Los Gatos CA 95030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Author

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2012

**Transaction ID : IDTA8**

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Amy Joyce Rao**

Mailing Address 6700 Koll Center Parkway, Suite 14

City State Zip Code  
Pleasanton CA 94566

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Integrated Archive Systems

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

**Transaction ID : INCA35**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Lisa Serwin**

Mailing Address 85 Reservoir Road

City State Zip Code  
Los Gatos CA 95030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Author

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 26 / 2012

**Transaction ID : INCA34**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**We Vote - Nosotros Votamos - PPAMM Committee**

Full Name (Last, First, Middle Initial)

## **A. South Bay AFL-CIO Labor Council**

Mailing Address 2102 Almaden Road, Suite 107

City State Zip Code  
 San Jose CA 95125

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 21 2012

**Transaction ID : INCA23**

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00

41070.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 17

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**We Vote - Nosotros Votamos - PPAMM Committee**

Full Name (Last, First, Middle Initial)

## **A. Friends for Harry Reid**

Mailing Address P.O. Box 19163

City

Las Vegas

State

NV

Zip Code

89132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 17 / 2012

**Transaction ID : INCA30**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

50.00

50.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 17  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**We Vote - Nosotros Votamos - PPAMM Committee**

Full Name (Last, First, Middle Initial)

## **A. Planned Parenthood Advocates Mar Monte**

Mailing Address 1691 The Alameda

City State Zip Code  
 San Jose CA 95126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10605.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 27 2012

**Transaction ID : INCA39**

Amount of Each Receipt this Period

1285.00

Funds deposited in error to be refunded in subsequent period

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1285.00

1285.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**We Vote - Nosotros Votamos - PPAMM Committee**

Full Name (Last, First, Middle Initial)

**A. Olson Hagel & Fishburn, LLP**

Mailing Address 555 Capitol Mall, Suite 1425

City	State	Zip Code
Sacramento	CA	95814

Purpose of Disbursement  
Legal & Reporting Services

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2012

**Transaction ID : EXPB28**

Amount of Each Disbursement this Period

1374.50
---------

Full Name (Last, First, Middle Initial)

**B. Olson Hagel & Fishburn, LLP**

Mailing Address 555 Capitol Mall, Suite 1425

City	State	Zip Code
Sacramento	CA	95814

Purpose of Disbursement  
Legal & Reporting Services

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2012

**Transaction ID : EXPB31**

Amount of Each Disbursement this Period

992.77
--------

Full Name (Last, First, Middle Initial)

**C. Wells Fargo Bank**

Mailing Address P.O. Box 6995

City	State	Zip Code
Portland	OR	97228

Purpose of Disbursement  
Bank Fee

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2012

**Transaction ID : EXPB40**

Amount of Each Disbursement this Period

261.77
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2629.04

2629.04



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 17 OF 17

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

We Vote - Nosotros Votamos - PPAMM Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Planned Parenthood Advocates Mar Monte

Nature of Debt (Purpose):  
Fundraising Expenses

Mailing Address 1691 The Alameda

City State

Zip Code

San Jose

CA

95126

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD43

Amount Incurred This Period

8458.24

Payment This Period

0.00

Outstanding Balance at Close of This Period

8458.24

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

8458.24

2) **TOTALS** This Period (last page this line number only)..... ►

8458.24

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

8458.24